PATENT APPLICATION FEE DETERMINATION RECORD Effective October 1, 2003 /0750535													
CLAIMS AS FILED - PART I (Column 1) (Column 2)								SMALL ENTITY TYPE			OTHER THAN R SMALL ENTITY		
T	OTAL CLAIMS	:	56					RATE	FEE	1	RATE	FEE	
FOR			NUMBER FILEO		NUMBER EXTRA			BASIC FEI	385.00	OR	BASIC FEE	770.00	
CLAIMS AS TOTAL CLAIMS FOR TOTAL CHARGEABLE CLAIMS INDEPENDENT CLAIMS MULTIPLE DEPENDENT CLAIM PR If the difference in column 1 is in CLAIMS AS AI (Column 1) CLAIMS AS AI (Column 1) Total Total Total Total CLAIMS REMAINING AFTER AMERICAIENT Total CLAIMS CLA		56 m	nus 20=	• 36			X\$ 9=		OR	X\$18-	648		
IN.	DEPENDENT C	5 m	nus 3 =	2			X43a	 		X86=	122		
M	ULTIPLE DEPE	NDENT CLAIM P	RESENT					7402		OR	A603	112	
								+1450		OR	+290s		
* If the difference in column 1 is less than zero, enter "0" in column 2								TOTAL		OR	TOTAL	1590	
	C		MENDE		SMALL	ENTHY	OR	OTHER SMALL					
	111/	CLAIMS	1 -	(Cohur Reck	E51	(Column 3)	1	JAMEL	ADDI-	1	OMMEL.	ADDI-	
E	177/00	ACTED		PREVIO	USLY	PRESENT EXTRA		RATE	TIONAL		RATE	TIONAL	
9			Minus	PAID				¥0.0	FEE		X\$18=	FEE	
3		- 36	Minus	- 5	6			X\$ 9=		OR			
₹		ENTATION OF ME				_P		X43•		OR	X66-		
_						'	+145=	 ,	OR	+290-			
	7/20/						•	TOTAL MOOT, FEE		OR	TOTAL		
	Old Do (Column 1) (Column 2) (Column 3)									-			
8				HOGH		PRESENT		·C	ADDI-		Z_{-}	ADDI-	
50	٠			PREVIO		EXTRA		RATE	TIONAL FEE		RATE	TIONAL FEE	
	Total	. 41	Minus	×5	Cor	•	H	X\$ 9-		OR	X\$18=		
9	Independent	• 2	Minus	***	X	•	ll	X43=			X86=		
<	FIRST PRESE	NTATION OF MI	ATIPLE DE	PENDENT	CLAIM		1			OR			
				Ņ			l	+145=		OR	>290=		
	•		•				,	TOYAL ODIT, FEE		OR	ADDIT, FEE		
_		(Column 1)		(Colum		(Column 3)							
ပ	9/2-1	REMAINING		HEAR	NER .	PRESENT	lſ	RATE	ADOI- TIONAL		RATE	ADDI- TIONAL	
EDC	'/d//ok	AFTER AMENDMENT		PREMO		EXTRA	L	PAIE	FEE.		MAIE	FEE	
ğ	Total	• 4/	Minus	-,5	6	. —		X\$ 9=		OR	X\$18=		
AMENDA	Independent	· 0.	Miras	** L	1	• —		X43=		OR	X86-		
<u> </u>	FIRST PRESE	NTATION OF MU	RUTIPLE OF	ENDENT	CAM		1			UH			
* # 145= OR +290=													
[the Hishest Nur	nber Previously Pa	M For EN THE	S SPACE IS	less than	20, enter "20."	· A	TOTAL DOTT, FEE		OR	TOTAL DOT. FEE		
7	r trie Yoghest Mar The Yoghest Mari	mber Proviously Pet ber Proviously Peti	ss For By THE For (Total or	s SPICE is Independe	ng to the	i.a. enter "J." highest number			ropriste bos			'	

Application or Docket Number